

General practitioners and alternative medicine

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SUMMARY. A questionnaire on the views, beliefs and attitudes of doctors regarding alternative medicine was sent to 274 general practitioners. Of the 222 who replied, 31% said that they had a working knowledge of at least one form of alternative medicine, 29% had read publications on alternative medicine and 41% had attended lectures or classes in alternative medicine. Twelve per cent had received training and 42% wanted further training in an alternative form of medicine; 16% currently practised a form of alternative medicine. The majority of doctors (95%) said that patients had discussed alternative medicine with them during the past year and over half (59%) had referred patients to alternative practitioners. Forty-one per cent of doctors believed that alternative systems of medicine were valid and over half of the doctors (54%) defined alternative medicine as additional to western medicine, not taught in western medical schools or not available on the National Health Service, compared with only 16% who defined alternative medicine as unscientific.

Introduction

PUBLIC interest in alternative forms of medicine is increasing and this is reflected in the number of publications about alternative medicine.^{1,4} During his term as President of the British Medical Association, the Prince of Wales urged the Association to look critically at modern medicine. He suggested that 'today's unorthodoxy is probably going to be tomorrow's convention'. The Association's Board of Science has recently published its report on alternative medicine.⁵ Its terms of reference were: 'To consider the feasibility and possible methods of assessing the value of alternative therapies, whether used alone or to complement other treatments and to report on the evidence to the Board of Science and Education.'

However, there have, as yet, been few published studies on the use of alternative medicine in western countries. A survey in 1980 of 3782 adults in the Netherlands showed that 6.9% had consulted complementary medical practitioners in the previous year.⁶ A study conducted in 1980-81 demonstrated that there were about 12 practitioners of alternative medicine per 100 000 population in the United Kingdom and annual consultation rates of between 19.5 and 25.7 per 100 population, depending on the region of the country.⁷ A questionnaire study of general practitioner trainees in the UK showed that 76% wished to learn one or more alternative skills such as hypnotherapy, acupuncture or homeopathy.⁸ A recent study of 145 general practitioners in the UK demonstrated that 59% of doctors thought that alternative forms of medicine were useful to their patients, although only a small number of therapies were considered.⁹

The present study was undertaken to ascertain the beliefs of a sample of general practitioners about alternative medicine and their working relationship with alternative forms of medicine.

Method

The 274 general practitioners who had a practice address in Oxfordshire made up the study group. They were sent a postal questionnaire with a postage paid return envelope during the winter of 1985-86. The questionnaire covered five main areas: background information about the doctors; their knowledge and training in alternative medicine; their practice of alternative medicine; their referral of patients to alternative practitioners; and their views and beliefs about alternative medicine. Specific therapies were not identified, nor was alternative medicine defined, in order to avoid restricting the respondents to a limited range of disciplines.

The doctors were asked whether they had any working knowledge of alternative medicine and whether they had attended classes, received training or would like training in alternative medicine. Those who practised an alternative form of medicine were asked which discipline(s) they practised, what criteria they used for diagnosis, the length of time spent with each patient, the number of patients and the conditions they had treated in the past year.

The doctors were also asked how many patients had discussed alternative medicine with them and how many patients they had referred to alternative practitioners in the past year. To ascertain their views on alternative medicine, the general practitioners were asked whether alternative systems of medicine had a valid theoretical basis and to state their definitions of alternative medicine.

Results

Of the 274 general practitioners, 222 (81%) replied. The distribution of sex, age and number of partners of the respondents was similar to that of the non-respondents.

Of the respondents, 92 (41%) had attended lectures or classes in alternative medicine, 68 (31%) believed that they had a working knowledge of alternative medicine, 26 (12%) had received training in alternative medicine and 93 (42%) would like training or further training in alternative medicine (Table 1).

Characteristics of doctors

Sixty-one per cent of doctors aged under 35 years had attended lectures or classes, compared with 38% of those aged over 35 years ($\chi^2 = 6.7$, 1 df, $P < 0.01$). A working knowledge of and training in alternative medicine were related to the number of partners but not the respondent's age. Fifty-nine per cent of those who were single handed or who had one partner had a working knowledge of alternative medicine, compared with 27% of those with two or more partners ($\chi^2 = 11.4$, 1 df, $P < 0.001$). Twenty-five per cent of those with one or no partners had received training in alternative medicine, compared with 10% of those with two or more partners ($\chi^2 = 5.4$, 1 df, $P < 0.05$). Fifty-four per cent of doctors aged under 45 years wanted further training in alternative medicine compared with 30% of those aged over 45 years ($\chi^2 = 12.0$, 1 df, $P < 0.01$).

Thirty-five doctors (16%) practised one or more forms of alternative medicine — 13 practised manipulation, nine hypnotherapy, six acupuncture, three psychotherapy, two homeopathy, one yoga, one transcendental meditation, one Chris-

Table 1. Knowledge of and training in alternative medicine for therapies specified by 222 doctors (more than one therapy could be specified).

Therapy	Number (%) of doctors			
	Attended lectures or classes	Working knowledge	Received training	Would like training
Manipulation	42 (18.9)	62 (27.9)	11 (5.0)	55 (24.8)
Acupuncture	44 (19.8)	31 (14.0)	3 (1.4)	29 (13.1)
Homeopathy	31 (14.0)	29 (13.1)	2 (0.9)	20 (9.0)
Hypnotherapy	20 (9.0)	24 (10.8)	11 (5.0)	18 (8.1)
Yoga	5 (2.3)	1 (0.5)	1 (0.5)	—
Alexander technique	1 (0.5)	—	—	1 (0.5)
Food allergy therapy	2 (0.9)	1 (0.5)	—	1 (0.5)
Psychotherapy	3 (1.4)	5 (2.3)	3 (1.4)	—
Herbalism	2 (0.9)	—	—	—
Relaxation	2 (0.9)	—	—	—
Transcendental meditation	2 (0.9)	1 (0.5)	—	—
Christian healing	1 (0.5)	—	—	1 (0.5)
Massage	1 (0.5)	—	—	—
Bach flowers	1 (0.5)	—	—	—
Transactional analysis	—	1 (0.5)	1 (0.5)	—
Reflexology	—	1 (0.5)	—	—
Touch therapy	—	1 (0.5)	—	—
Faith healing	—	1 (0.5)	—	1 (0.5)
All	92 (41.4)	68 (30.6)	26 (11.7)	93 (41.9)

tian healing and one food allergy therapy. Practice of alternative medicine was not related to the age of the doctors. However, 19% of male doctors practised alternative medicine compared with 3% of female doctors ($\chi^2 = 5.4$, 1 df, $P < 0.05$). Thirty-six per cent of doctors who were single handed or who had one partner practised alternative medicine compared with 13% of doctors with two or more partners ($\chi^2 = 9.6$, 1 df, $P < 0.01$).

Training

Nine doctors practised alternative medicine without training and of these four had attended classes and five had not. The disciplines practised without training or attendance at classes were manipulation, instruction in transcendental meditation, hypnotherapy, acupuncture and Christian healing.

Consultation length

The average consultation for alternative medicine was over twice as long as that for normal practice (mean $21.9 \pm$ standard error 2.4 minutes for the 35 doctors compared with 9.0 ± 0.1 minutes for all 222 doctors).

Method of diagnosis

Of the 35 doctors practising alternative medicine, 24 (69%)

diagnosed according to western medicine, one (3%) by the criterion of the alternative medicine practised (psychotherapy) and 10 (29%) by a combination of both. The estimated total number of patients treated with alternative medicine by the 35 practising doctors during the previous year was over 2000 (Table 2) which was 5% of the total number of patients seen by these doctors.

Patients' attitudes

Two hundred and eleven doctors (95%) said that one or more patients had discussed alternative medicine with them during the previous year while 130 doctors (59%) had referred one or more patients to alternative practitioners within the past year (Table 3). The doctors estimated that about 5000 patients (1.8% of all patients seen) had discussed alternative medicine and 1500 (0.5% of all patients seen) had been referred to alternative practitioners during the previous year (excluding patients treated with alternative therapies by the doctors themselves). Referral of patients to alternative practitioners was not related to the sex, age or number of partners of the doctors, but 82% of those with a working knowledge of alternative medicine had referred patients, compared with 50% without a working knowledge ($\chi^2 = 19.4$, 1 df, $P < 0.001$).

Table 2. Estimated number of patients treated with alternative therapies by the 35 practising doctors during the previous year.

Condition	Number of patients receiving therapy				
	Manipulation	Acupuncture	Hypnotherapy	Homeopathy	Other
Spine/joint problems	900	22	2	5	9
Acute illness	—	42	10	60	—
Pain	—	700	10	—	5
Chronic illness	—	—	53	5	19
Psychological problems ^a	—	5	132	30	42
Undiagnosed symptoms	—	—	2	—	3
Total	900	769	209	100	78
					2056

^a Including difficulty in giving up smoking

Table 3. Discussion with patients and referral to alternative practitioners during the previous year for therapies specified by 222 doctors (more than one therapy could be specified).

Therapy	Number (%) of doctors	
	Discussed	Referred
Manipulation	198 (89.2)	111 (50.0)
Acupuncture	131 (59.0)	44 (19.8)
Homeopathy	91 (41.0)	40 (18.0)
Hypnotherapy	53 (23.9)	33 (14.9)
Faith healing	3 (1.4)	—
Food allergy therapy	16 (7.2)	7 (3.2)
Ecology	1 (0.5)	—
Herbalism	11 (5.0)	1 (0.5)
Radionics	1 (0.5)	—
Relaxation	2 (0.9)	2 (0.9)
Hair analysis	1 (0.5)	—
Cancer therapy	2 (0.9)	2 (0.9)
Touch healing	1 (0.5)	1 (0.5)
Alexander technique	3 (1.4)	1 (0.5)
Yoga	4 (1.8)	4 (1.8)
Reflexology	1 (0.5)	—
Bach flowers	1 (0.5)	—
Transcendental meditation	1 (0.5)	1 (0.5)
Naturopathy	—	1 (0.5)
Massage	—	1 (0.5)
All	211 (95.0)	130 (58.6)

Doctors' beliefs

Ninety-one doctors (41%) believed that the theoretical basis of at least one discipline of alternative medicine was valid (Table 4). A belief in the validity of alternative medicine was not related to the doctors' sex, age or training in alternative medicine, but 60% of those practising alternative medicine believed the theoretical basis to be valid, compared with 37% of those not practising ($\chi^2 = 6.2$, 1 df, $P < 0.05$).

The respondents were asked to give their definition of alternative medicine (Table 5). Only 16% of doctors gave the definition 'unscientific' while 54% gave the definitions 'additional to western medicine', 'not taught in medical schools' or 'not available on the National Health Service'. The type of definition given was not related to the doctors' sex, age or training or practice in alternative medicine.

Table 4. Disciplines of alternative medicine thought by the 222 doctors to have a valid theoretical basis (more than one therapy could be specified).

Therapy	Number (%) of doctors considering therapy valid
Manipulation	71 (32.0)
Acupuncture	33 (14.9)
Hypnotherapy	18 (8.1)
Homeopathy	16 (7.2)
Food allergy therapy	7 (3.2)
Faith healing	2 (0.9)
Transcendental meditation	2 (0.9)
Christian healing	1 (0.5)
Relaxation	1 (0.5)
Herbalism	1 (0.5)
Yoga	1 (0.5)
Alexander technique	1 (0.5)
Psychotherapy	1 (0.5)
All	91 (41.0)

Table 5. Definitions of alternative medicine given by the 222 doctors (more than one definition could be given).

Definition	Number (%) of doctors giving definition
Additional to western medicine	56 (25.2)
Not taught in medical schools	42 (18.9)
Unscientific	36 (16.2)
Not available on the NHS	22 (9.9)
Unorthodox	22 (9.9)
Different model of disease	18 (8.1)
Not recognized by profession	11 (5.0)
Holistic	9 (4.1)
Other	9 (4.1)
No definition given	36 (16.2)

Discussion

The high response rate (81%) to the questionnaire in this study indicates a high level of interest in alternative medicine among general practitioners. The respondents were asked to estimate the numbers of patients with whom alternative medicine was discussed or practised or who were referred to alternative practitioners. However, numbers were not validated by an audit of records and may not accurately reflect the total number of patients involved.

Two-fifths of all the respondents had attended classes or lectures in alternative medicine. The fact that younger doctors were more likely to have attended classes or lectures than older doctors may reflect the fact that many general practice training schemes offer lectures within their programmes. Despite the fact that alternative systems of medicine are still not recognized by many parts of the medical profession, two-fifths of the doctors wanted training or further training in alternative medicine.

Single-handed doctors or those with only one partner were more likely to have a working knowledge of or to practice alternative medicine than doctors with two or more partners. This may indicate that practitioners who are single handed or who have one partner are more individualistic and more likely to take up unorthodox methods of treatment.

Consultations for alternative medicine were over twice as long as those for conventional medicine and this should be taken into account when comparing patients' satisfaction with alternative and conventional medicine.

There are three aspects to the controversy of alternative medicine: first, many of the disciplines practised have a different model of health and disease from that commonly accepted by the medical profession; secondly, few concerted or systematic scientific trials have been carried out; thirdly, when trials are undertaken and demonstrate a positive outcome, this does not automatically validate the theories of that discipline. Despite this, two-fifths of the doctors regarded some type of alternative medicine as having a valid theoretical basis. Only 16% of doctors defined alternative medicine as 'unscientific' and the majority defined it in terms that would not automatically exclude it from consideration.

Although only a relatively small number of patients are involved, this and a previous study⁹ have demonstrated a high level of interest in and acceptance of alternative medicine among general practitioners. It is unfortunate, therefore, that the report of the British Medical Association⁵ was dismissive of alternative medicine and unhelpful to these practitioners. The report could have had broader vision without losing its scientific credibility. The report concluded that 'whilst an assessment of alternative therapies is feasible it may not be either necessary or desirable'. However, when western medicine is unable to relieve many unpleasant symptoms and conditions, it would seem that

we have a duty to the public to assess the benefits and harms of alternative practices.

Three further comments should be made. First, all doctors who wish to practise alternative medicine should have adequate and recognized training; such training should be readily available. Secondly, existing registers of alternative practitioners should be made widely available for both doctors and members of the public. Thirdly, as doctors are referring patients to practitioners of alternative medicine, some provision should be made by the health service for patients who are in effect being told that the health service cannot deal with or provide for their needs.

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Life after smoking

The effect of giving up cigarette smoking on the incidence of non-fatal myocardial infarction was assessed in men under the age of 55 years in a case-control study of 1873 men with first episodes of myocardial infarction and 2775 controls. For 'current' smokers (men who had smoked in the previous year) as compared with those who had never smoked, the estimated relative risk of myocardial infarction, adjusted for age, was 2.9 (95% confidence interval, 2.4 to 3.4). Among ex-smokers (those who had last smoked at least one year previously), the relative-risk estimate declined to a value close to 1.0 for those who had abstained for at least two years; the estimate was 2.0 (1.1 to 3.8) for men who had abstained for 12 to 23 months, and the estimates were about 1.0 for men who had abstained for longer intervals. The results were unchanged by allowance for multiple potential confounding factors. A similar pattern was apparent among ex-smokers who had smoked heavily for many years; among those predisposed to a myocardial infarction because of family history, hypertension, or other risk factors; and among those with no apparent predisposition. The results suggest that the risk of myocardial infarction in cigarette smokers decreases within a few years of giving up to a level similar to that in men who have never smoked.

Source: Rosenberg L, Kaufman DW, Helmrich SP, *et al*. The risk of myocardial infarction after quitting smoking in men under 55 years of age. *N Engl J Med* 1985; 313: 1511-1514.

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